FEVER.-F. M. Wells, M.D., of Charleston, Ind. (St. Louis Medical Review), took the above subject for his address before the State Medical Association. He contended that there is no more important study in the whole range of medicine than that of fever, in its many causes and effects. It is encountered in so many diseases, is so obscure in its origin, is fraught with so many consequences, and is so difficult in its treatment. The first difficulty we encounter in the study of fever is that physiologists have not been able to solve the problem of the production of heat and its regulation in the normal state of health. It is true that a vast amount of knowledge has been acquired on the laws of cutaneous evaporation, the influence of circulation, and the supply of food on heat; but still this is only the surface of the great question. It is now known that when living organisms or their toxines are introduced into the system there is a rise of temperature, which continues until the poison is removed from the body or the animal dies. Underlying all this is the whole question of phagocytosis, now occupying the attention of so many experimenters. But there is a physiological and pathological phagocytosis. When germs or toxines enter the system there is an active warfare between the cells of the body on the one hand and the invading enemy on the other. victory of the former is recovery; of the latter, death. With this warfare there is fever. Some hold that this fever is an aid to the cells of the body to overcome and vanquish the enemy. But it is very hard to understand how the cells of the body can do their work better in a pathological heat than in the normal heat of the body. It is only fair to conclude that the fever is an aid to the germ, rather than to the cell. When we study the habits of the leading organisms that cause disease, we see that they thrive best at a temperature slightly above that of the normal heat of the body. This would seem to favor the view that the fever is an aid to the enemy. again, we all know how fatal high temperatures are. Clinically, there is abundance of grounds for the belief that the judicious abstraction of heat shortens the duration of febrile diseases. It seems to improve the resisting power of the body or to weaken the organisms. On the other hand, the rash use of antipyretics may seriously weaken the patient and cause fatal results, or prolong the illness. Great care is necessary in the administration of the whole group of antipyretic drugs. Acetanilid, in acute cases, and quinine, in the more chronic cases, are to be mainly relied upon. The use of sponging and bathing is of the utmost importance. Much care should be exercised to avoid shock in the use of the cold bath.